

**BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP**

09/649143

TELEPHONE: (408) 720-8300

INTELLECTUAL PROPERTY LAW  
12400 WILSHIRE BOULEVARD, 7TH FLOOR  
LOS ANGELES, CA 90025

FACSIMILE: (408) 720-8383

**RECEIVED  
CENTRAL FAX CENTER****FACSIMILE COVER SHEET****MAY 04 2006**

Deliver to: USPTO Art Group: \_\_\_\_\_  
 Facsimile No.: (571) 273-8300 Date: May 4, 2006  
 From: Daniel M. DeVos, Reg. No. 37,813  
 Our Docket No.: 6468P010 Number of pages 2 including this sheet.  
 Patent No.: 6,952,671 Issue Date: 10/4/2005  
 Docket Due Date(s): \_\_\_\_\_

Enclosed are the following documents:

- |   |   |
|---|---|
| <input type="checkbox"/> Amendment: _____ ( _____ pgs)  | <input type="checkbox"/> Issue Fee Transmittal                                    |
| <input type="checkbox"/> Appeal Brief ( _____ pgs)  | <input type="checkbox"/> Notice of Appeal   |
| <input type="checkbox"/> Application: _____<br>( _____ pgs) w/cover & abstract  | <input type="checkbox"/> Petition for: _____                                      |
| <input type="checkbox"/> Assignment & Cover Sheet ( _____ pgs)  | <input type="checkbox"/> Request for Continued Examination (RCE)                  |
| <input checked="" type="checkbox"/> Certificate of Facsimile _____  | <input type="checkbox"/> Reply Brief ( _____ pgs)                                 |
| <input type="checkbox"/> Continued Prosecution Application (CPA)  | <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)     |
| <input type="checkbox"/> Declaration & POA ( _____ pgs)   | <input type="checkbox"/> Request to Rescind Previous Nonpublication Request       |
| <input type="checkbox"/> Drawings: _____ sheets, _____ figures  | <input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter |
| <input type="checkbox"/> Extension of Time: _____   | <input type="checkbox"/> Response to Written Opinion ( _____ pgs)                 |
| <input type="checkbox"/> Fee Transmittal (in duplicate)   | <input type="checkbox"/> Terminal Disclaimer                                      |
| <input type="checkbox"/> IDS & PTO/SB/08 ( _____ pgs)   | <input type="checkbox"/> Transmittal of Publication Fee Due                       |
| <input checked="" type="checkbox"/> Other Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page) | <input type="checkbox"/> Transmittal Letter                                       |

**CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)**

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

Harleen Bains5/4/2006

Date

**Confidentiality Note:** The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

If you do not receive all the pages, or if there is any difficulty in receiving, please call: (408) 720-8300 and ask for Harleen Bains.

RECEIVED  
CENTRAL FAX CENTER

T-367 P.002/002 F-143

MAY 04 2006

PTO/SB/83 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Patent Number	6,952,871
Issue Date	10/04/2005
First Named Inventor	Victor Kolesnik
Art Unit	
Examiner Name	
Attorney Docket Number	6468P010

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☐ the attorneys/agents associated with Customer Number

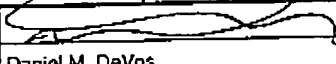
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: The client has requested to handle the maintenance fees for this Patent. I am duly authorized to sign on behalf of the other attorneys identified pursuant to the above selected box.

## CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:  
☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	XVD Corporation		
Address	44061 Nobel Drive		
City	Fremont	State	CA
Country	USA	Zip	94538
Telephone	(510) 870-0100	Email	
Signature			
Name	Daniel M. DeVos	Registration No.	37,813
Date	May 4, 2006	Telephone No.	(408) 720-8300

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.